

**Congress of the United States**  
**House of Representatives**  
Washington, DC 20515

April 29, 2021

The Honorable Matt Cartwright  
Chair, Subcommittee on Commerce, Justice,  
Science, and Related Agencies  
Committee on Appropriations  
Capitol Building, H-310  
Washington, DC 20515

The Honorable Robert Aderholt  
Ranking Member, Subcommittee on  
Commerce, Justice, Science, and Related  
Agencies  
Committee on Appropriations  
1016 Longworth House Office Building  
Washington, DC 20515

Dear Chairman Cartwright and Ranking Member Aderholt,

We write to express our strong support for funding of the Mentally Ill Offender Treatment and Crime Reduction Act (MIOTCRA) in the FY2022 Commerce, Justice, Science, and Related Agencies appropriations bill. This important program was recently reauthorized in the 21<sup>st</sup> Century Cures Act and provides states and local governments with necessary resources to plan and implement initiatives for people with mental illnesses involved with the criminal justice system in order to increase public safety, reduce state and local spending, and improve the lives of people with mental illnesses and their families.

People with mental illnesses tend to stay in jail longer than people without mental illnesses—for example, people with mental illnesses spend twice as long in jail awaiting trial than people without mental illnesses. They are also more likely to return to jail. Jails spend two to three times more on people with mental illnesses, and yet this investment has not translated into increased public safety or advances in longer-term recovery.

Leaders in law enforcement, courts, corrections, and the mental health community understand the importance of working together to develop solutions that address the behavioral health needs of individuals prior to their entry into the criminal justice system.

Congress can take a leadership role to address this challenge by continuing its bipartisan support for this funding to bring together mental health providers, criminal justice agencies, consumers and family members to better identify and address the needs of people with mental health conditions in

order to reduce recidivism, long-term incarceration, and other criminal justice costs. MIOTCRA supports innovative approaches and programs that bring together mental health and criminal justice agencies to address the unique needs of persons with mental health conditions, including:

**Police – Mental Health Collaborations:** These efforts, which prioritize treatment over incarceration when appropriate, are planned and implemented in partnership with community service providers and citizens. MIOTCRA has supported Montgomery County, Alabama to provide Crisis Intervention Team (CIT) training to 25 percent of uniformed patrol officers and first responders. The grant is also allowing the county to facilitate diversion opportunities for people booked into the Montgomery County Jail with mental illness or co-occurring mental illness and addiction. Additionally, Douglas County, Kansas used JMHCP funding to launch a systems-wide approach to jail diversion including implementing CIT, a co-responder team, pre-arrest diversion, jail screening and assessment, and a behavioral health campus that provided crisis services, problem-solving beds, and housing. Through these efforts, the county reported that they had a 56 percent reduction in jail books for people with serious mental illnesses from 2014 to 2018. Today they are continuing their work with the goal of eliminating the disparity between the percentage of people in jail with a serious mental illness and the percentage of people in the community with a serious mental illness. Also, in Texas is the largest public mental health call center in the state, operated by the Houston Police Department with assistance from mental health professionals, patrol unit officers, and phone counselors from Houston’s Harris Center for Mental Health. In 2018, clinicians responded to over 4,000 mental health-related calls initiated through 911 that resulted in 1,597 diversions for situations better served by connecting callers to mental health professionals rather than dispatching law enforcement to the scene.

**Mental Health Courts and Other Court-Based Initiatives:** Throughout the country, judges and attorneys have been leading collaborative efforts with their behavioral health partners. MIOTCRA is the primary source of federal funding to support mental health courts and grant funding and technical assistance have helped expand mental health courts from four programs in 1997 to well over 300 today, with programs found in almost every state. In New York, the Bronx Mental Health Court provides court-supervised treatment and case management services as an alternative to incarceration and serves as a national peer learning site. In Kentucky, the Hardin County Mental Health Court used grant funding to provide co-occurring substance use disorder treatment and residential crisis services for participants. MIOTCRA has also provided critical funding for juvenile court mental health liaisons, adding capacity for mental health treatment during pretrial release, and prosecutor-led diversion programs.

**Peer Learning Programs:** Four mental health courts,<sup>1</sup> nine law enforcement-mental health learning sites,<sup>2</sup> and twenty-seven Stepping Up Innovator Counties<sup>3</sup> promote peer-to-peer learning and the sharing of expertise. The sites represent a diverse cross-section of regions, models, and strategies that other jurisdictions may consider when developing their own collaborative programs.

**Collaborative County Approaches to Reduce Prevalence in Jails:** Correctional agencies and mental health organizations are collaborating to provide quality care pre-release and connect individuals to appropriate services post-release. The New York City Mayor’s Office of Criminal Justice implemented an alternatives-to-incarceration program in partnership with a community-based provider to serve people with frequent jail contact. In Pacific County, Washington leaders are working to ensure that people are screened and assessed for mental illnesses at the time of booking into the county jail.

**Programs for Youth Involved in the Juvenile Justice System:** Communities are working to improve treatment and services to address mental illnesses, substance use, problem behaviors, or risk factors in youth who are involved or at risk for involvement with the justice system. In Maryland, officials formed a collaborative to improve care for justice-involved youth who have mental illnesses or co-occurring substance use disorders and are returning to their communities from residential placements. To inform its initiatives, the collaborative hosted forums with youth and their families, examined local data, and reviewed evidence-based and best practices. In addition, the District of Columbia Family Court is working to expand the Juvenile Behavioral Diversion Program using MIOTCRA funding.

**The Stepping Up Initiative:** In response to widespread recognition that jails across the country have become warehouses for thousands of people with mental illnesses, MIOTCRA supports a national movement to provide counties with the tools they need to develop cross-systems, data-driven strategies that can lead to measurable reductions in the number of people with mental illnesses and co-occurring disorders in jails. Over 525 counties—representing 43 states and 49 percent of the U.S. population—have passed resolutions or proclamations to participate in the initiative. In addition, multiple states including Alabama, California, Kansas, Ohio, and Pennsylvania have launched statewide Stepping Up Initiatives to support their local communities in these efforts.

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<sup>1</sup> Mental health courts: (1) Bonneville County Mental Health Court (Idaho Falls, ID), (2) Dougherty Superior Court Mental Health Substance Abuse Division (Albany, GA), (3) New York EAC’s Mental Health Diversion Program (New York, NY), and (4) Ramsey County Mental Health Court (St. Paul, MN).

<sup>2</sup> Law enforcement/mental health collaboration programs: (1) Arlington Police Department (Arlington, MA), (2) Houston Police Department (Houston, TX), (3) Los Angeles Police Department (Los Angeles, CA), (4) Madison County Sheriff’s Office (Madison County, TN), (5) Madison Police Department (Madison, WI), (6) Portland Police Department (Portland, ME), (7) Salt Lake City Police Department (Salt Lake City, UT), (8) Tucson Police Department (Tucson, AZ), and (9) University of Florida Police Department (Gainesville, FL).

<sup>3</sup> Stepping Up Innovator Counties: (1) Berks County, PA, (2) Bernalillo County, NM, (3) Calaveras County, CA, (4) Carlton County, MN, (5) Champaign County, IL, (6) Dallas County, IA, (7) Douglas County, KS, (8) Douglas County, NE, (9) Fairfax County, VA, (10) Franklin County, OH, (11) Fulton County, GA, (12) Hennepin County, MN, (13) Island County, WA, (14) Johnson County, KS, (15) Lubbock County, TX, (16) Marion County, IN, (17) Miami-Dade County, FL, (18) Mobile County, AL, (19) Montgomery County, PA, (20) Pacific County, WA, (21) Philadelphia County, PA, (22) Polk County, IA, (23) Reno County, KS, (24) San Joaquin County, CA, (25) San Luis Obispo County, CA, (26) Sarpy County, NE, and (27) Shelby County, AL.

In September 2020, Stepping Up launched Set, Measure, Achieve, a renewed call to action, which asks counties to publicly commit to measurable reductions of the number of people with mental illness in their jails and report on their progress. To date, nine counties have announced their targets, with additional sites from across the country also joining the effort.

**Research-Based System Improvements in Counties:** MIOTCRA also supports qualitative and quantitative research to improve outcomes for people with mental illnesses in county criminal justice systems nationally. Counties have received a range of technical assistance from analyzing data to better understand what is driving large populations with mental illness in the jails to identify opportunities to improve policies, practices and collaboration between systems to supporting systems mapping and concrete planning to improve outcomes for people with mental illnesses in the justice system Projects have been completed in Bexar County (TX), Dauphin County (PA), Franklin County (OH), Johnson County (KS), Hillsborough County (NH), New York City, Salt Lake County (UT), Douglas County (KS), and Tulsa (OK). Following technical assistance in Salt Lake County, recommendations were endorsed by local leaders in 2015, and the mayor and county council committed \$5.2 million to local criminal justice reforms.

**On Demand Support to the Field:** Launched in 2020, the Center for Justice and Mental Health Partnerships provides free training and resources to communities wanting to improve responses to people in their criminal justice system who have a mental illnesses or co-occurring substance use disorders. The Center helps communities safely implement best practices to divert people away from the criminal justice system and connect them to treatment and supports while also promoting public safety. Any jurisdiction across the country can request help and will receive a range of resources through virtual and in-person consultation, connections with subject matter experts, peer to peer learning, and invitations to webinars or other virtual events.

MIOTCRA was enacted in 2004 and reauthorized in 2008 and 2016 with broad bipartisan support. The program was reauthorized as part of the 21<sup>st</sup> Century Cures Act, which incorporated two bills: The Comprehensive Justice and Mental Health Act and the Mental Health and Safe Communities Act. The provisions in the Cures Act made improvements to MIOTCRA that would support state and local efforts to identify people with mental health conditions at each point in the criminal justice system in order to appropriately connect them with mental health services; increase focus on corrections-based programs, such as transitional services that reduce recidivism rates and screening practices that identify inmates with mental health conditions; support the development of curricula for police academies and orientations; and develop programs to train federal law enforcement officers in how to respond appropriately to incidents involving a person with a mental health condition. It also expands treatment and transitional services for people reentering society from prison and jail with mental illnesses, substance use problems, or chronic homelessness.

To date, MIOTCRA appropriations have funded mental health courts, other court-based initiatives, local police departments, and other programs to improve outcomes for people with mental illness and co-occurring substance use conditions who come in to contact with the justice system. MIOTCRA has provided a total of 568 grants to 49 states, plus the District of Columbia, Guam, and American Samoa.

With the responsibility of responding to and treating people with mental illnesses often falling on an already strained criminal justice system, it is clear that we need to redirect resources from containment to more effective strategies and treatment. By focusing our efforts on this population, we have an opportunity to address overcrowding in our correctional facilities and to stop using jails and prison as substitutes for a properly functioning mental health system. We appreciate your subcommittee's continued support for this important program in the FY2022 CJS bill.

Sincerely,



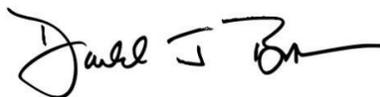
Robert C. "Bobby" Scott  
Member of Congress



Tom Emmer  
Member of Congress



Norma Torres  
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Don Bacon  
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/s/

Alma S. Adams, Ph.D.  
Member of Congress

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Cindy Axne  
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Nanette Diaz Barragán  
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